

USAF AERO CLUB STANDARDIZATION RECORD

PILOT'S NAME (Last, First, MI)		AIRMAN'S CERTIFICATE #	
FLIGHT DETAILS		TYPE CHECK	
AIRCRAFT MAKE AND MODEL		STANDARDIZATION (<input type="checkbox"/> Initial <input type="checkbox"/> Annual)	
		AIRCRAFT MAKE & MODEL	
TOTAL TIME FLOWN DURING CHECKOUT		INSTRUMENT (<input type="checkbox"/> Initial <input type="checkbox"/> Annual)	
		NIGHT	
INSTRUCTOR'S NAME (Last, First)		INSTRUCTOR (<input type="checkbox"/> Initial <input type="checkbox"/> Annual)	
		RECURRENCY	
WRITTEN TESTS PASSED (<input type="checkbox"/> Open Book <input type="checkbox"/> Closed Book)		OTHER: (Specify)	

REMARKS: (Use reverse if necessary)

PILOT IS QUALIFIED

PILOT IS NOT QUALIFIED
(List details and restrictions below)

☐ MEMBER COMPLETED A FLIGHT REVIEW IAW FAR 61.56

 MEMBER COMPLETED AN INSTRUMENT COMPETENCY CHECK IAW FAR 61.57

I certify that I have read and understand all applicable FAA and USAF regulations/directives pertinent to flying in USAF Aero Club aircraft. I believe I have been properly trained and that I am fully qualified to act as Pilot In Command in the capacity indicated.

PILOT'S SIGNATURE	DATE (DD MMM YY)
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I certify that I have administered an Aero Club checkout IAW the USAF Aero Club Instructor Guide and believe the named pilot is fully qualified to act as Pilot in Command in the capacity indicated.

INSTRUCTOR'S SIGNATURE	DATE (DD MMM YY)
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PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C., 8013 **PRINCIPLE PURPOSE:** To maintain record of pilot qualifications required by AFMAN 34-232. **ROUTINE USE:** Will be disclosed to appropriate federal or state agencies conducting accident investigations involving USAF Aero Club aircraft. **DISCLOSURE:** Disclosure of Airman's Certificate number is voluntary but lack of disclosure will result in denial of club privileges.